

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	LSW	72	2/12
FORMALITY REVIEW	MP	579	8/6/01
RESPONSE FORMALITY REVIEW	FB	1078	10/24/01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	X	6/25/02	
2	X	12/1/02	
3	X	3/9/03	
4	X	9/17/03	
5	X	4/20/04	
6	X		
7	X		
8	X		
9	X		
10	X		
11	X		
12	X		
13	X		
14	X		
15	X		
16	X		
17	X		
18	X		
19	X		
20	X		
21	X		
22	X		
23	X		
24	X		
25	X		
26	X		
27	X		
28	X		
29	X		
30	X		
31	X		
32	X		
33	X		
34	X		
35	X		
36	X		
37	X		
38	X		
39	X		
40	X		
41	X		
42	X		
43	X		
44	X		
45	X		
46	X		
47	X		
48	X		
49	X		
50	X		

Claim	Final	Original	Date
51	X	6/25/02	
52	X	12/1/02	
53	X	3/9/03	
54	X	9/17/03	
55	X	4/20/04	
56	X		
57	X		
58	X		
59	X		
60	X		
61	X		
62	X		
63	X		
64	X		
65	X		
66	X		
67	X		
68	X		
69	X		
70	X		
71	X		
72	X		
73	X		
74	X		
75	X		
76	X		
77	X		
78	X		
79	X		
80	X		
81	X		
82	X		
83	X		
84	X		
85	X		
86	X		
87	X		
88	X		
89	X		
90	X		
91	X		
92	X		
93	X		
94	X		
95	X		
96	X		
97	X		
98	X		
99	X		
100	X		

Claim	Final	Original	Date
101	X	6/25/02	
102	X	12/1/02	
103	X	3/9/03	
104	X	9/17/03	
105	X	4/20/04	
106	X		
107	X		
108	X		
109	X		
110	X		
111	X		
112	X		
113	X		
114	X		
115	X		
116	X		
117	X		
118	X		
119	X		
120	X		
121	X		
122	X		
123	X		
124	X		
125	X		
126	X		
127	X		
128	X		
129	X		
130	X		
131	X		
132	X		
133	X		
134	X		
135	X		
136	X		
137	X		
138	X		
139	X		
140	X		
141	X		
142	X		
143	X		
144	X		
145	X		
146	X		
147	X		
148	X		
149	X		
150	X		

BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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